U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION					FOR INSU	RANCE COMPANY USE	
A1. Building Owner's Name SHERON ROGERS					Policy Num	nber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.426 FOURTH ST				. Route and	Company N	NAIC Number:	
City WAVELAND	1		*******	State Mississippi		ZIP Code 39576	***************************************
A3. Property Desc TAX PARCEL # (19		nd Block Numbers, Tax 3.000)	Parce	l Number, Legal De	escription, etc.)		***************************************
A4. Building Use (e.g., Residen	tial, Non-Residential, A	ddition	, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longi	tude: Lat. N	30-16-15	Long. V	V 89-23-16	Horizontal Datum	: NAD	1927 🛛 NAD 1983
A6. Attach at least	2 photograpl	hs of the building if the	Certific	ate is being used to			
A7. Building Diagra	am Number	5					
A8. For a building	with a crawls _l	pace or enclosure(s):					
a) Square foo	tage of crawls	space or enclosure(s)		0 sqft			
b) Number of	permanent flo	ood openings in the cra	wlspac	e or enclosure(s) w	ithin 1.0 foot above	adjacent gr	ade 0
c) Total net ar	ea of flood op	penings in A8.b0	s	q in			-
d) Engineered	flood opening	gs? 🗌 Yes 🔲 No)				
A9. For a building v	vith an attach	ed garage:					
a) Square foot	age of attach	ed garage0		sq ft			
b) Number of	permanent flo	ood openings in the atta	ached g	jarage within 1.0 fo	ot above adjacent g	rade	0
c) Total net are	ea of flood op	enings in A9,b	0	sq in			
d) Engineered	flood opening	gs?	0	•			
	SE	CTION B – FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMAT	TION	V117771111111.
B1. NFIP Communi WAVELAND 28526	-	ommunity Number		B2. County Name HANCOCK			B3. State Mississippi
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	E1	IRM Panel fective/	B8. Flood Zone(s)	(Zoi	se Flood Elevation(s) ne AO, use Base
28045C-0344	D	10/16/2009	10/16	evised Date /2009	AE	Floc	od Depth) 20
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: ☐ FIS Profile ☑ FIRM ☐ Community Determined ☐ Other/Source:							
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source;							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🔲 Yes 🗵 No							
Designation Date: CBRS OPA							

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the correspor	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, a 426 FOURTH ST	Policy Number:		
City WAVELAND		IP Code 9576	Company NAIC Number
SECTION C - BUILDING	ELEVATION INFORM	ATION (SURVEY RI	EQUIRED)
	ruction Drawings* Ben construction of the builen construction of the builen pulled building diagram specifical Datus in items a) through h) be her/Source: same as that used for the wispace, or enclosure flow the building comments)	Building Under Construilding is complete. BFE), AR, AR/A, AR/ In Item A7. In Puertom: NAVD 1988 Blow.	Check the measurement used.
g) Highest adjacent (finished) grade next to builh) Lowest adjacent grade at lowest elevation of	lding (HAG)	12. 3 N/A.	
structural support SECTION D – SURVEYO	OR ENGINEER OR AS	POULTECT CERTIFY	CATION
This certification is to be signed and sealed by a land I certify that the information on this Certificate represent statement may be punishable by fine or imprisonment. Were latitude and longitude in Section A provided by Certifier's Name DUKE LEVY Title SURVEYOR Company Name DUKE LEVY & ASSOCIATES Address	surveyor, engineer, or an ents my best efforts to into t under 18 U.S. Code, Se	rchitect authorized by lerpret the data availab action 1001.	law to certify elevation information
1711 WAVELAND AVE City WAVELAND	State Mississippi	ZIP Code 39576	OF MISSISSI
Signature	Date 07/10/2018	Telephone (228) 467-5212	
Copy all pages of this Elevation Certificate and all attach Comments (including type of equipment and location, WO # 18-186 BENCHMARK - A MAG NAIL WITH A DISK SET IN TI	per C2(e), if applicable)		

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

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ELEVATION CERTIFICATE

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Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION					FOR INSU	RANCE COMPANY USE	
A1. Building Owner's Name SHERON RODGERS				Policy Nur	nber:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 426 FOURTH ST				Company	NAIC Number:		
City WAVELAND				State Mississippi		ZIP Code 39576	
A3. Property Desc TAX PARCEL # (1		ind Block Numbers, Ta 6.000)	x Parce	el Number, Legal De	escription, etc.)		4
A4. Building Use	(e.g., Resider	ntial, Non-Residential, /	Addition	ı, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Long	itude: Lat. N	30-16-15	Long. V	V 89-23-16	Horizontal Datum	: NAD	1927 🛛 NAD 1983
A6. Attach at leas	t 2 photograp	hs of the building if the	Certific	cate is being used t			·············
A7. Building Diagr	am Number	5					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of crawl	space or enclosure(s)		0 sq ft			
b) Number of	permanent flo	ood openings in the cra	wlspac	e or enclosure(s) w	rithin 1.0 foot above	adjacent gr	ade 0
c) Total net ar	ea of flood o _l	penings in A8.b 0)	sq in			
d) Engineered	l flood openin	gs? Yes No	0				
A9. For a building	with an attach	ned garage:					
a) Square foo	tage of attach	ned garage0		sq ft			
b) Number of	permanent flo	ood openings in the atta	ached g	garage within 1.0 fo	ot above adjacent g	rade	0
		enings in A9.b			_		
		gs? Yes No		•			
	SE	CTION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMA	ION	
B1. NFIP Communi WAVELAND 28526	<u> </u>	ommunity Number		B2. County Name HANCOCK			B3. State Mississippi
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Ef.	RM Panel fective/ evised Date	B8. Flood Zone(s)	Zoi	e Flood Elevation(s) ne AO, use Base nd Depth)
28045C0344	D	10/16/2009	10/16		AE	FIOC	20
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: [FIS Profile FIRM Community Determined Other/Source:							
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No							
Designation D	ate:	c	BRS	□ ОРА			

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

MPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY US						
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 426 FOURTH ST Policy Number:						
City	Company NAIC Number					
WAVELAND						
SECTION C – BUILDING I	ELEVATION INFORM	ATION (SURVEY R	EQUIRED)			
*A new Elevation Certificate will be required wher	construction of the bui					
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: USM NETWORK Vertical Datum: NAVD 1988						
Indicate elevation datum used for the elevations in ☐ NGVD 1929 ☒ NAVD 1988 ☐ Othe		low.				
Datum used for building elevations must be the sa		BFE.	Check the measurement used.			
a) Top of bottom floor (including basement, craw	space, or enclosure floo	or)26. 3				
b) Top of the next higher floor		N/A	X feet meters			
c) Bottom of the lowest horizontal structural mem	ber (V Zones only)	N/A				
d) Attached garage (top of slab)		N/A.	X feet meters			
e) Lowest elevation of machinery or equipment so (Describe type of equipment and location in Co	ervicing the building omments)	N/A.	X feet meters			
f) Lowest adjacent (finished) grade next to building	ng (LAG)	12. 0	X feet meters			
g) Highest adjacent (finished) grade next to buildi	na (HAG)	12.3				
h) Lowest adjacent grade at lowest elevation of d structural support		 	X feet meters			
SECTION D – SURVEYO	R ENGINEER OR AS	PCHITECT CERTIFIC	CATION			
This certification is to be signed and sealed by a land s I certify that the information on this Certificate represent statement may be punishable by fine or imprisonment	urveyor, engineer, or ar	chitect authorized by erpret the data availal	law to certify elevation information			
Were latitude and longitude in Section A provided by a	**************************************		Check here if attachments.			
Certifier's Name	License Number					
DUKE LEVY	01722		DUKELEL			
Title SURVEYOR						
Company Name DUKE LEVY & ASSOCIATES						
Address 4412 LEISURE TIME DRIVE			Here			
			OF MISSISS!			
City DIAMONDHEAD	State Mississippi	ZIP Code 39525				
Signature	Date 11/26/2018	Telephone (228) 467-5212				
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.						
Comments (including type of equipment and location, per C2(e), if applicable) WO # 18-186-1 BENCHMARK - A MAG NAIL WITH A DISK IN THE CENTERLINE OF FOURTH STREET AT THE PROPERTY AND AT AN ELEVATION OF 12.50' FEET.						

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner

	SEC1	TION A - PROPERTY			oran, (2) modranoo a		Thy, and (3) building owner
A1. Building Owner's		HON A - FROI ERI.	BVI C	KWATON		Policy Nun	RANCE COMPANY USE
SHERON ROGERS						Fully Nai.	iber.
A2. Building Street A Box No. 426 FOURTH ST	ddress (inc	cluding Apt., Unit, Suite	e, and/	or Bldg. No.) or P.O	. Route and	Company I	NAIC Number:
City WAVELAND				State Mississippi		ZIP Code 39576	
A3. Property Descrip TAX PARCEL # (162		nd Block Numbers, Ta 5.000)	x Parce	el Number, Legal De	escription, etc.)		
		tial, Non-Residential, A		Ť,			
A5. Latitude/Longitud	de: Lat. <u>N</u>	30-16-15	Long.	W 89-23-16	Horizontal Datum	ı: NAD	1927 🔀 NAD 1983
		ns of the building if the					
A7. Building Diagram	Number _	5					
A8. For a building wit	th a crawlsp	pace or enclosure(s):					
a) Square footag	ge of crawls	space or enclosure(s)		0 sq ft			
b) Number of per	rmanent flo	od openings in the cra	wlspad	ce or enclosure(s) w	rithin 1.0 foot above	adjacent gr	ade 0
		enings in A8.b 0		sq in		-	
		gs? ☐ Yes ☐ No					
A9. For a building with			,				
a) Square footag	ie of attach	ed garage 0		sa ft			
		od openings in the atta			ot above adiacent o	rade	0
		enings in A9.b			or madra majarani. G		
d) Engineered flo		**************************************		_ 34 111			
u) Engineered no	ion obermi	gs? [] Yes [] No					
	SEC	CTION B - FLOOD IN	ISURA	ANCE RATE MAP	(FIRM) INFORMA	TION	
B1. NFIP Community i		 		B2. County Name			B3. State
WAVELAND 285262				HANCOCK			Mississippi
B4. Map/Panel B Number B	35. Suffix	B6. FIRM Index Date	E	IRM Panel ffective/	B8. Flood Zone(s)	(Zor	se Flood Elevation(s) ne AO, use Base
28045C0344 D)	10/16/2009		tevised Date 8/2009	AE	Floo	od Depth) 20
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:							
☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other/Source:							
B11. Indicate elevation	n datum us	ed for BFE in Item B9:	: 🔲 N	GVD 1929 🗵 NA	VD 1988	er/Source: _	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No							
Designation Date: CBRS OPA							
=		LJ ~	Ditt				

OMB No. 1660-0008 **ELEVATION CERTIFICATE** Expiration Date: November 30, 2018 IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Policy Number: 426 FOURTH ST City State ZIP Code Company NAIC Number WAVELAND Mississippi 39576 SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* X Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: USM NETWORK Vertical Datum: NAVD 1988 Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 X NAVD 1988 ☐ Other/Source: Datum used for building elevations must be the same as that used for the BFE. Check the measurement used. a) Top of bottom floor (including basement, crawlspace, or enclosure floor) _ 14.1 X feet ☐ meters b) Top of the next higher floor 26 3 |X | feet □ meters c) Bottom of the lowest horizontal structural member (V Zones only) N/A |X | feet meters N/A._ d) Attached garage (top of slab) x feet meters 25.8 e) Lowest elevation of machinery or equipment servicing the building x feet meters (Describe type of equipment and location in Comments) Lowest adjacent (finished) grade next to building (LAG) 13.0 x feet meters g) Highest adjacent (finished) grade next to building (HAG) 13.6 x feet meters h) Lowest adjacent grade at lowest elevation of deck or stairs, including 13.5 |X | feet meters structural support SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. Were latitude and longitude in Section A provided by a licensed land surveyor? Check here if attachments. Certifier's Name License Number **DUKE LEVY** 01722 Title SURVEYOR Company Name **DUKE LEVY & ASSOCIATES** Address 4412 LEISURE TIME DRIVE City State ZIP Code DIAMONDHEAD Mississippi 39525 Signature Date Telephone 02/19/2019 (228) 467-5212 Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner. Comments (including type of equipment and location, per C2(e), if applicable) WO # 18-186-1 BENCHMARK - A MAG NAIL WITH A DISK IN THE CENTERLINE OF FOURTH STREET AT THE PROPERTY AND AT AN ELEVATION OF 12.50' FEET. AN A/C UNIT IS THE LOWEST MACHINERY SERVICING THE HOME AND IT IS LOCATED ON THE NORTH SIDE

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the co	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 426 FOURTH ST			Policy Number:
City WAVELAND	State Mississippi	ZIP Code 39576	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption



Photo Two

Photo Two Caption

WAVELAMD

NONCONVERSION AGREEMENT with

CITY OF WAVELAND, MISSISSIPPI

2019 1914	
Recorded in the Above	
Deed Book & Page	
02-13-2019 08:21:28	AM
Timothy A Kellar	
Hancock County	

Unnegali Cauch

- 1	nancock county
This DECLARATION made this 12 day of February, 20 19, by Jim Sheren Rogers ("Owner") having an address	I certify this instrument was filed on
by Jim & Sheron Rogers ("Owner") having an address	s@1-13-2019 08:21:28 AM
426 W. Fourth St.	and recorded in Deed Book
WITNESSETH:	2019 at pages 1914 - 1914
WHEREAS, the Owner is the record owner of all that real property located at	Timothy A Kellar
in the City of Waveland, Ms. in the County	of Hancock,
designated in the Tax Records as 1620-1-10-096.000	LA LI WAYANCEDIO
WHEREAS, the Owner has applied for a permit to place a structure on that property	
enclosed area below the base flood elevation constructed in accordance with the req	
Article No. 5, Section "B" paragraph 5 of the Waveland Floodplain Management Ord	inance of Number
325 and under Permit Number X00411	
	EQ: (1)
WHEREAS, the Owner agrees to record this DECLARATION and certifies and declar	res that the
following covenants, conditions and restrictions are placed on the affected property a	s a condition of
granting the Permit, and affects rights and obligations of the Owner and shall be bind	ing on the Owner, The ONTY
his heirs, personal representatives, successors, future owners, and assigns.	William .

UPON THE TERMS AND SUBJECT TO THE CONDITIONS, as follows:

- 1. The structure or part thereof to which these conditions apply is:
- 2. At this site, the Base Flood Elevation is 70+1 feet above mean sea level, National Geodetic Vertical Datum.
- 3. Enclosed areas below the Base Flood Elevation shall be used solely for parking of vehicles, limited storage, or access to the building. All interior walls, ceilings and floors below the Base Flood Elevation shall be unfinished or constructed of flood resistant materials. Mechanical, electrical or plumbing devices shall not be installed below the Base Flood Elevation.
- 4. The walls of the enclosed areas below the Base Flood Elevation shall be equipped and remain equipped with openings as shown on the Permit.
- 5. The jurisdiction issuing the Permit and enforcing the Ordinance may take any appropriate legal action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.
- 6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than compared County of Hancock each year. More frequent inspections may be conducted if an annual inspection discoversion discoversion before me, the undersigned annority in and for the said county and state, of the Permit. on this 15th day of Fobrum 2019

7. Other conditions:

knowledged that they executed the In witness whereof the undersigned set their hands and seals this

My Commission Expires Dec. 31, 2019

my Jurisdiction, the within named Roces